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|  | PATENT   | APPLICATION Effection           | ON FEE C          | D                        | Application or Docket Number |                                  |       |                   |                        |            |                     |                        |
|--|--|---------------------------------|-------------------|--------------------------|------------------------------|----------------------------------|-------|-------------------|------------------------|------------|---------------------|------------------------|
|  |  | CLAIMS A                        | SMALL             | ENTITY                   |                              |                                  |       |                   |                        |            |                     |                        |
| _  |  |                                 | (Colum            | n 1)                     | (Column 2)                   |                                  |       | SMALL ENTITY TYPE |                        | OR         | OTHER THAN          |                        |
| TOTAL CLAIMS   |  |                                 | 5.                |                          |                              |                                  |       | RATE              | FEE                    | <u>ק</u>   | RATE                | FEE                    |
| FOR  |  |                                 | NUMBER FILED      |                          | NUMBER EXTRA                 |                                  |       | BASIC F           | 375.00                 | OR         | BASIC FEE           |                        |
| TOTAL CHARGEABLE CLAIMS  |  |                                 | 4// minus 20=     |                          | • 61                         |                                  | ]     | X\$ 9=            |                        | OR         | X\$18=              |                        |
| INDEPENDENT CLAIMS.  |  |                                 | 2 minus 3 =       |                          | 0                            |                                  |       | X42=              | 1                      | 7          | \                   |                        |
| MULTIPLE DEPENDENT CLAIM PI  |  |                                 | RESENT            |                          |                              |                                  | 1     | -                 | <del> </del>           | -IOR       |                     |                        |
| * 11   | the difference   | in column 1 is                  | Aro entor         | *0° in .                 | noliuma O                    | 3                                | +140= |                   | OR                     | +280=      |                     |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2                                     |  |                                 |                   |                          |                              |                                  |       |                   |                        | OR         | TOTAL               |                        |
| 2/34/06 CLAIMS AS AMENDED - PART II OTHER THAN (Column 1) (Column 2) (Column 3) SMALL ENTITY OR SMALL ENTITY |  |                                 |                   |                          |                              |                                  |       |                   |                        |            |                     |                        |
|  |  | CLAIMS HIGH                     |                   |                          | (Column 3)                   | 4                                | SMALI | <del></del>       | OR                     | SMALL      |                     |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT |                   | NUME<br>PREVIO<br>PAID I | USLY                         | PRESENT<br>EXTRA                 |       | PATE              | ADDI-<br>TIONAL<br>FEE |            | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | .43                             | Minus             | 4                        | //_                          | - 2                              |       | X\$ 9=            |                        | OR         | X\$18=              | 10000                  |
|  | Independent  | NTATION OF M                    | Minus             | ###<br>DEMOCATE          | 3                            | =                                |       | X42=              |                        | OR         | X84=                |                        |
|  | 7771200  | HIN TOR OF M                    | OLI IPLE DE       | PENUENI                  | CLAIM                        |                                  | j     | +140=             |                        | OR         | +280≈               |                        |
|  | •  |                                 | ٠.                |                          |                              |                                  |       | TOTA              |                        | 4          | TOTAL               | Ima                    |
| 5  | 26.05  | (Calumn 1)                      |                   | (Colum                   | · .                          | (Oak 0)                          |       | ADDIT. FEI        | <u> </u>               | OR         | ADDIT. FEE          | 1000                   |
| AMENDMENT B  |  | CLAIMS<br>REMAINING             |                   | HIGH                     | SI                           | (Column 3)                       | 1     |                   |                        | <b>3</b> 1 |                     |                        |
|  |  | AFTER<br>AMENDMENT              |                   | NUMB<br>PREVIO           | USLY                         | PRESENT<br>EXTRA                 |       | RATE              | ADDI-<br>TIONAL        |            | RATE                | ADDI-<br>TIONAL        |
|  | Total  | * 43                            | Minus             | PAID F                   | S<br>S                       |                                  | ł     | <b></b>           | FEE                    |            |                     | FEE                    |
|  | Independent  | • 2/                            | Minus             |                          | <u>)</u><br>2                | =                                |       | X\$ 9=            | <u> </u>               | OR         | X\$18=              |                        |
| A  | FIRST PRESENTATION OF MULTIPLE DEPE  |                                 |                   | PENDENT                  | CLAIM                        |                                  |       | X42=              | 1                      | OR         | X84=                |                        |
| 1,21,  |  |                                 |                   |                          |                              |                                  |       | +140=             |                        | OR         | +280=               | _                      |
|  |  |                                 |                   |                          |                              |                                  |       | TOTAL             |                        | OR         | YOTAL               |                        |
|  |  | (Column 1)                      |                   | (Colum                   | n 2)                         | (Column 3)                       |       | ADDIT, FEE        |                        | • • • •    | YOTAL<br>ADDIT. FEE |                        |
| C  |  | CLAIMS<br>REMAINING             |                   | HIGHE                    | ST                           |                                  | 1     |                   | ADDI                   | 1          |                     |                        |
| 2  |  | AFTER<br>AMENDMENT              |                   | PREVIO                   | USLY                         | PRESENT<br>EXTRA                 |       | RATE              | ADDI-<br>TIONAL        |            | RATE                | ADDI-<br>TIONAL        |
| AMENDMENT  | Total  | WWELSTANEN!                     | Minus             | PAID F                   | OR                           |                                  |       | 240.5             | FEE                    |            |                     | FEE                    |
| 9  | Independent  | *                               | Minus             | ***                      |                              | =                                |       | X\$ 9=            |                        | OR.        | X\$18=              |                        |
| کا   | FIRST PRESE  | NTATION OF MU                   | ILTIPLE DEF       | 1                        | CLAIM                        |                                  |       | X42=              |                        | OR         | X84=                |                        |
| +140= 00 +280  |  |                                 |                   |                          |                              |                                  |       |                   |                        |            |                     |                        |
| * H  | the entry in column the "Highest Num   | TOTAL                           |                   |                          | TOTAL                        |                                  |       |                   |                        |            |                     |                        |
| •  | "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  TOTAL ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                 |                   |                          |                              |                                  |       |                   |                        |            |                     |                        |
| -  | AND LINES IN STREET  | her Previously Pa               | no ror in imi     | S SPACE IS               | loss man                     | 7 J, enter "3."                  |       |                   |                        |            |                     |                        |
| 1  | AND LINES IN STREET  | DET PTEVIOUSIY PASC             | to For" (Total or | o STACE IS<br>Independen | ioss the                     | i 3, enter "3."<br>highest numbe | r fou | ind in the ap     | propriate box          | in coh     | ann 1.              |                        |